



Docket No. 740756-2187

#1810  
L Tyson  
7/11/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Shunpei YAMAZAKI et al. ) Group Art Unit: 2675  
Serial No.: 09/619,478 ) Examiner: Uchendu O. ANYASO  
Filed: July 19, 2000 ) Confirmation No.: 1882  
For: DISPLAY DEVICE AND METHOD ) Date: July 7, 2003  
FOR OPERATING THE SAME

CERTIFICATE OF MAILING OR TRANSMISSION  
[37 CFR 1.8(a)]

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Signature: \_\_\_\_\_

Name: Linda C. Haynes

AMENDMENT

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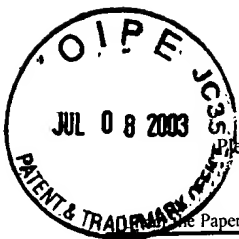
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Sir:

In response to the Office Action mailed April 7, 2003, please amend the above identified application and consider Applicant's remarks in relation with the above-identified application.



2675

Please type a plus sign (+) inside this box → [ + ]

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/619,478	
	<b>Filing Date</b>	July 19, 2000	
	<b>First Named Inventor</b>	Shunpei YAMAZAKI	
	<b>Group Art Unit</b>	2675	
	<b>Examiner Name</b>	Uchendu O. ANYASO	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	740756-2187

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Other  <b>RECEIVED</b> <b>JUL 10 2003</b> <b>Technology Center 2600</b>
<b>Remarks</b>		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Luan C. Do, Reg. No. 38,434 Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22102
Signature	
Date	July 7, 2003

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Date	July 7, 2003

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